ORIGINAL

Notice of Exempt Offering of Securities

U.S. Securities and Exchange Commission

Washington, DC 20549

(See instructions beginning on page 5)

OMB APPROVAL

OMB Number: 3235-0076

Expires: March 31, 2009

Estimated average burden hours per response: 4.00

em 1. Issuer's Identity			
Name of Issuer	[a : 41/2		Entity Type (Select one)
Lake Street Fund, L.P.	Previous Name(s)	None None	Corporation
Jurisdiction of Incorporation/Organization			Limited Partnership
Delaware		PROCESSED	Limited Liability Company General Partnership
Year of Incorporation/Organization (Select one)		MAR 2 7 2009	Business Trust Other (Specify)
Over Five Years Ago	Years (Years)	Be Formed REVIEW	\$
f more than one issuer is filing this notice, c em 2. Principal Place of Business			ttaching items 1 and 2 Continuation Page(s).)
Street Address 1	and Contact Informat	Street Address 2	
		pareety and a second	
1224 E. Green Street, Suite 200			
City	State/Province/Country	ZIP/Postal Code	Phone No.
Pasadena	California	91106	626.796.6622
em 3. Related Persons			
Last Name	First Name		Middle Name SEC
Lake Street Management, LLC			Section
Street Address 1		Street Address 2	
1224 E. Green Street, Suite 200			MAR 1-1-2009
City	State/Province/Country	ZIP/Postal Code	
			Washington, DO
Pasadena	California	91106	~ 1@1
Relationship(s): Executive Officer	Director Promoter		
Clarification of Response (if Necessary)	eneral Partner		
(iden	tify additional related person	s by checking this box 🗵	and attaching Item 3 Continuation Page(s).)
em 4. Industry Group (Select			
Agriculture	Business	Services	Construction
Banking and Financial Services	Energy		REITS & Finance
Commercial Banking	$\overline{\mathcal{L}}$	tric Utilities gy Conservation	Residential
Insurance	Q	Mining	Other Real Estate
Investing Investment Banking	Q	ronmental Services	Retailing
Pooled Investment Fund	<u> </u>	Gas	Restaurants
If selecting this industry group, also sel		r Energy	Technology
type below and answer the question b	_	aro	Computers
Hedge Fund		echnology	Telecommunications Other Technology
Private Equity Fund	Ξ.	th Insurance	Other Technology
Venture Capital Fund	O Hosp	itals & Physcians	Trav
Other Investment Fund		maceuticals	
Is the issuer registered as an inve company under the Investment (_ { } Oute	r Health Care	
Act of 1940? Yes ONO	Manufac	-	
Other Banking & Financial Services	Real Esta		Ot. 09035878

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Item 5. Issuer Size	(Select one)	

Revenue Range (for issuer not specifying "hedge" or "other investment" fund in Item 4 above)	Aggregate Net Asset Value Range (for issuer specifying "hedge" or "other investment" fund in Item 4 above)
No Revenues	OR No Aggregate Net Asset Value
\$1-\$1,000,000	\$1-\$5,000,000
\$1,000,001 - \$5,000,000	0
\$5,000,001 - \$25,000,000	\$5,000,001 - \$25,000,000
\$25,000,001 - \$100,000,000	\$50,000,001 - \$100,000,000
,	
0 - " - "	Over \$100,000,000 Decline to Disclose
O Decline to Disclose O Not Applicable	Decline to Disclose Not Applicable
_	•
Item 6. Federal Exemptions and Exclusions Clai	med (Select all that apply) vestment Company Act Section 3(c)
Rule 504(b)(1) (not (i) (ii) or (iii))	5 - 1 - 2/-1/0\
Rule 504(b)(1)(i)	
Rule 504(b)(1)(ii)	
Rule 504(b)(1)(iii)	
Rule 505	
	Section 3(c)(5) Section 3(c)(13)
Securities Act Section 4(6)	Section 3(c)(6) Section 3(c)(14)
	Section 3(c)(7)
Item 7. Type of Filing	
New Notice OR • Amendment	
Date of First Sale in this Offering:	OR First Sale Yet to Occur
Item 8. Duration of Offering	
Does the issuer intend this offering to last more than o	one year? X Yes No
Item 9. Type(s) of Securities Offered (Select a	ll that apply)
Equity	▼ Pooled Investment Fund Interests
☐ Debt	Tenant-in-Common Securities
Option, Warrant or Other Right to Acquire	Mineral Property Securities
Another Security	Other (Describe)
Security to be Acquired Upon Exercise of Option, Warrant or Other Right to Acquire Security	
Item 10. Business Combination Transaction	
Is this offering being made in connection with a busine transaction, such as a merger, acquisition or exchange offer	103 10
Clarification of Response (if Necessary)	
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Washington, DC 20549 Item 11. Minimum Investment Minimum investment accepted from any outside investor 100,000 (subject to waiver) Item 12. Sales Compensation Recipient Recipient CRD Number No CRD Number (Associated) Broker or Dealer CRD Number None (Associated) Broker or Dealer No CRD Number Street Address 2 Street Address 1 ZIP/Postal Code City State/Province/Country All States States of Solicitation AR] CA AK] MI KY □ ME MD MA IL ∏ KS LA ΠIA ND 📳 KOK X MT NE **J.NH** NJ NM ÑΥ NC OH 😹 OR 🤏 ☐ UT □ ∨τ □ VA ☐ WA WV ☐ WI ☐ RI $\prod TX$ \Box sc ☐ SD TN (Identify additional person(s) being paid compensation by checking this box 🔲 and attaching Item 12 Continuation Page(s).) Item 13. Offering and Sales Amounts OR ✓ Indefinite (a) Total Offering Amount (b) Total Amount Sold 66,602,114.37 (c) Total Remaining to be Sold OR X Indefinite (Subtract (a) from (b)) Clarification of Response (if Necessary) U.S. investors only - net of withdrawals. Item 14. Investors Check this box if securities in the offering have been or may be sold to persons who do not qualify as accredited investors, and enter the number of such non-accredited investors who already have invested in the offering: Enter the total number of investors who already have invested in the offering: 92 Item 15. Sales Commissions and Finders' Fees Expenses Provide separately the amounts of sales commissions and finders' fees expenses, if any. If an amount is not known, provide an estimate and check the box next to the amount. Sales Commissions \$ **Estimate Estimate** Finders' Fees \$ Clarification of Response (if Necessary)

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Item 16. Use of Proceeds	
Provide the amount of the gross proceeds of the offering that has been or is proposed to be used for payments to any of the persons required to be named as executive officers, directors or promoters in response to Item 3 above. If the amount is unknown, provide an estimate and check the box next to the amount.	Estimate
Clarification of Response (if Necessary)	
The Issuer will pay Lake Street Management, LLC a quarterly fee equal to 0.375% of assets and an annual incent of realized and unrealized net appreciation. In addition, the Issuer will reimburse the general partner and its affiliat organizational and initial offering expenses advanced on behalf of the Issuer.	ive fee equal to 20% es up to \$25,000 of
Signature and Submission	
Terms of Submission. In Submitting this notice, each identified issuer is: Notifying the SEC and/or each State in which this notice is filed of the offering of securities described and undertaking to furnish them, upon written request, in accordance with applicable law, the information furnished to Irrevocably appointing each of the Secretary of the SEC and the Securities Administrator or other legally d the State in which the issuer maintains its principal place of business and any State in which this notice is filed, as its process, and agreeing that these persons may accept service on its behalf, of any notice, process or pleading, and fu such service may be made by registered or certified mail, in any Federal or state action, administrative proceeding, against the issuer in any place subject to the jurisdiction of the United States, if the action, proceeding or arbitration activity in connection with the offering of securities that is the subject of this notice, and (b) is founded, directly or in provisions of: (i) the Securities Act of 1933, the Securities Exchange Act of 1934, the Trust Indenture Act of 1939, the Company Act of 1940, or the Investment Advisers Act of 1940, or any rule or regulation under any of these statutes;	esignated officer of sagents for service of urther agreeing that or arbitration brought in (a) arises out of any indirectly, upon the linvestment

This undertaking does not affect any limits Section 102(a) of the National Securities Markets Improvement Act of 1996 ("NSMIA") [Pub. L. No. 104-290, 110 Stat. 3416 (Oct. 11, 1996)] imposes on the ability of States to require information. As a result, if the securities that are the subject of this Form D are "covered securities" for purposes of NSMIA, whether in all instances or due to the nature of the offering that is the subject of this Form D, States cannot routinely require offering materials under this undertaking or otherwise and can require offering materials only to the extent NSMIA permits them to do so under NSMIA's preservation of their anti-fraud authority.

Each identified issuer has read this notice, knows the contents to be true, and has duly caused this notice to be signed on its behalf by the undersigned duly authorized person. (Check this box and attach Signature Continuation Pages for signatures of issuers identified in Item 1 above but not represented by signer below.)

Issuer(s)

Name of Signer

Scott W. Hood

Title

Manager of General Partner

Date

Number of continuation pages attached:

1

Persons who respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB number.

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Item 3 Continuation Page

Item 3. Related Persons (Continued) Last Name First Name Middle Name First Wilshire Securities Management, Inc. Street Address 2 Street Address 1 1224 E. Green Street, Suite 200 State/Province/Country ZIP/Postal Code City California 91106 Pasadena Executive Officer Director X Promoter Relationship(s): Clarification of Response (if Necessary) Middle Name Last Name First Name Astman Leonard Fredrick Street Address 2 Street Address 1 1224 E. Green Street, Suite 200 State/Province/Country ZIP/Postal Code City 91106 Pasadena California □ Executive Officer □ Director □ Promoter Relationship(s): Clarification of Response (if Necessary) Last Name Middle Name First Name William Hood Scott Street Address 2 Street Address 1 1224 E. Green Street, Suite 200 State/Province/Country ZIP/Postal Code City California 91106 Pasadena Relationship(s): Clarification of Response (if Necessary) Middle Name Last Name First Name Street Address 2 Street Address 1 City State/Province/Country ZIP/Postal Code Executive Officer Director Promoter Relationship(s): Clarification of Response (if Necessary)

(Copy and use additional copies of this page as necessary.)

END Form D 9